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## BIB DATA SHEET

CONFIRMATION NO. 1978

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
09/760,119	01/12/2001 RULE	435	1643	MBHB01-034		
<b>APPLICANTS</b> Sarah S. Bacus, Hinsdale, IL; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/176,514 01/12/2000 and claims benefit of 60/176,515 01/12/2000 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/16/2001						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/KAREN A. CANELLA/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance "Initials"	<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> MCDONNELL BOEHNNEN HULBERT & BERGHOFF LLP 300 S. WACKER DRIVE 32ND FLOOR CHICAGO, IL 60606 UNITED STATES						
<b>TITLE</b> Method for determining the response to cancer therapy						
<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			